## TAA/NAFTA-TAA GENERAL CODING INSTRUCTIONS

The following data specifications have been designed to capture all of the items identified as reporting requirements for the Trade Adjustment Assistance (TAA) and NAFTA-Transitional Adjustment Assistance (NAFTA-TAA) programs under the Trade Act of 1974, as amended.

Implementation of the TAA/NAFTA-TAA reporting system is to begin by including participants who become terminees from the TAA or NAFTA-TAA programs during the first quarter of fiscal year (FY) 1999 (October 1, 1998 through December 31, 1998). Each State is required to continue to prepare and submit reports covering terminees during each quarter thereafter; all reports must be submitted no later than 45 days after the end of the reporting quarter.

The following instructions provide the format and definitions that will be used to collect and transmit the terminee information each quarter. The data items in this system and their associated definitions are designed to provide information about program performance and outcomes for participants.

For purposes of this reporting system, a participant shall be deemed to have terminated if that participant has completed all of his/her reemployment program, or has withdrawn from such program prior to completion, and has received no other program benefits during the 90 days following completion/withdrawal. If the outcome for the participant is known earlier than 90 days after completion/withdrawal, the State should immediately deem the participant a terminee and record the outcome data.

As a rule, numeric fields which allow variable lengths should be right justified and alphabetic fields allowing variable lengths should be left justified. The field type for these particular fields will indicate which choice should be used in filling the field. Decimals should be entered in fields recording wages. These fields will be indicated in the coding instructions.

#### FISCAL YEAR 1999 TRANSMISSION PROCEDURES

### **General Instructions:**

Data can be submitted either in fixed fields or in comma-delimited fields (as explained below). A transmittal form should be included with each submission to provide for accountability.

### **Methods of Transmission:**

**E-mail**: The preferable way to send submissions is by E-mail. Compress the file using standard disk compression programs before sending. Send the E-mail transmission to **Alexandria\_Martinez@spra.com**.

**Diskette**: If possible, the States should submit one file per diskette. Data should be in ASCII flat files. Label each diskette with the State FIPS code. Label each diskette in sequence (Disk 1 of 20, Disk 2 of 20, etc.). Record the total number of diskettes being submitted on the transmittal form.

**Modem:** To submit records by modem, please contact David Wright at (650) 617-8625, x637 to obtain transmission specifications and to arrange for a convenient time.

**Hard Copy**: Indicate that hard copy is being transmitted on the transmittal form. Number pages in sequence (1 of 100, 2 of 100, etc.). Write the State FIPS code in the top left-hand corner of each page. Indicate on the transmittal form how may pages are being submitted.

**Magnetic Tape**: Specify the type, format, and size of tape on the transmittal form. All files should be in ASCII format. Label the tape(s) with the State FIPS code. If more than one tape is submitted, label each tape in sequence (Tape 1 of 2, Tape 2 of 2).

## Send data and correspondence to:

TAA Processing Social Policy Research Associates 200 Middlefield Road, Suite 100 Menlo Park, CA 94025

# TAA/NAFTA-TAA MEDIA TRANSMITTAL FORM - FY1999

1.	State:
2.	Contact Person: Phone: Address:
3.	Date Sent:
4.	Submission Type:  Disk(s) Number of disks Modem E-mail transmission (send to Alexandria_Martinez@spra.com Tape: Block Size: Type: Format:
5.	Filename:
6.	What file format are you using?  — Fixed fields — Comma-delimited fields
7	Total number of records in file:

# TAA/NAFTA-TAA DATA SPECIFICATIONS AND CODING GUIDELINES FOR FISCAL YEAR 1999

Field Number Size Position	TAA/NAFTA-TAA Item and Description	Guidelines
	Section I: Identifica	tion and Characteristics of Applicant
1 20 1-20 (Left Justify)	I.1. State name	Record the full name of the State reporting the data. (Note: this is an alphabetic field.)
2 9 21-29	I.2. Social Security Number	Record the individual's Social Security Number without dashes or spaces (e.g. 123456789).
3 8 30-37	I.3. Date of birth	Record the date of birth of the individual in MMDDYYYY format (e.g. 03051975).
4 1 38	I.4. Gender	Record the code indicating the individual's gender:  1 = Male.  2 = Female.
5 1 39	I.5. Race/Ethnicity	Record the code indicating the individual's race/ethnic group from among the following categories:  1 = American Indian or Alaska Native.  2 = Asian.  3 = Black or African American.  4 = Hispanic or Latino.  5 = Native Hawaiian or Other Pacific Islander.  6 = White.
6 1 40	I.6. Individual with a disability	Record the code which indicates the individual's disability status:  1 = Yes, and a substantial barrier to employment.  2 = Yes, but not a substantial barrier to employment.  3 = No.

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7 1 41	I.7. Veteran status	Record 1 for Yes or 2 for No to indicate whether or not the participant is a person who (A) served on active duty in the U.S. military for a period of more than 180 days and who was discharged or released with other than a dishonorable discharge, or (B) was discharged or released from active duty because of a service-connected disability, or (C) was discharged as a member of a reserve component under an order to active duty.
8 2 42-43	I.8. Highest school grade completed	Enter the highest school grade completed (00) by the individual, using the following codes:  00 No school grade completed.  01-11 Number of elementary/secondary grades completed (participants who completed 12 <sup>th</sup> grade but did not receive a diploma or equivalent are to be coded "11").  12 High school graduate or equivalent.  13-15 If a high school graduate or equivalent, the number of school years completed during college or full-time technical or vocational school.  16 Bachelor's degree or equivalent.  17 Fifth year of full-time college, Master's degree (1-year program) or equivalent.  18 Sixth year or more of full-time college, Master's degree (2-year program), Ph.D., or equivalent.
9 1 44	I.9. Limited English- language proficiency	Record the proficiency status of the individual:  1 = Native language is not English, and is unable to communicate in English, resulting in a barrier to employment.  2 = Does not meet any of the criteria in (1) above.
10 8 45-52	I.10. Most recent qualifying separation date	Record the most recent date of separation (MMDDYYYY) from trade-impacted employment that qualifies the individual to apply for Trade Adjustment Assistance.
11 6 53-58	I.11. Wage at most recent qualifying separation	Record the hourly wage (000.00) paid to the participant at the time of the participant's most recent qualifying separation.
Field Number Size Position	TAA/NAFTA-TAA Item and Description	Guidelines

12 3 59-61	I.12. Tenure with employer at most recent qualifying separation	Record the total number of months (000) that the applicant was employed with the employer of record as of the applicant's most recent qualifying separation.
13 8 62-69	I.13. Date of application	Record the date (MMDDYYYY) on which the individual applied for services under the TAA or NAFTA-TAA program.
14 6 70-75	I.14. Petition number	Record the petition number of the certification (000000) which applies to the applicant's worker group. If there is more than one petition number (for example, one each for TAA and for NAFTA-TAA), record the petition number of the program from which the training is paid, unless a waiver was issued (TAA program only). Do NOT include any alphabetic suffix; just report the petition number.
15 1 76	I.15. Program of participation	Enter the program under which the participant received services and benefits, using the following codes:  1 = TAA.  2 = NAFTA-TAA.  3 = Both.
16 8 77-84	I.16. Date of participation	Record the date (MMDDYYYY) on which the individual <b>began</b> to receive TAA or NAFTA-TAA-funded program services after initial screening for eligibility and after eligibility determination. An applicant becomes a participant upon first receipt of training (including travel and/or subsistence), Trade Readjustment Allowance, job search allowance, or relocation allowance.

Field Number Size Position	TAA/NAFTA-TAA Item and Description	Guidelines
17 1 85	I.17. Unemployment compensation status	Record the code (1, 2, or 3) indicating which of the following classifications best describes the individual's UC status at the time of application:  1 = Claimant: an individual who has filed a claim and has been determined monetarily eligible for benefit payments under one or more State or Federal unemployment compensation programs, and who has not exhausted benefit rights or whose benefit period has not ended.  2 = Exhaustee: an individual who has exhausted all UC benefit rights for which the applicant has been determined monetarily eligible, including extended benefit rights.  3 = None.

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	Section II:	Activity and Service Record
	II.1. Training	Record the following items for the TAA or NAFTA-TAA approved training received by the participant.
18 8 86-93	II.1a. Date entered	Record the date (MMDDYYYY) the participant's approved training began.
19 8 91-101	II.1b. Date completed or withdrew	Record the date (MMDDYYYY) the participant completed his/her approved training or withdrew permanently from such training.
20 1 102	II.1c. Training completed	<ul><li>1 = Completed his/her approved training course.</li><li>2 = Did not complete (withdrew).</li></ul>
21 1 103	II.1d. Travel while in training	<ul><li>1 = Received a travel allowance while in training.</li><li>2 = Did not.</li></ul>
22 1 104	II.1e. Subsistence while in training	1 = Received a subsistence allowance while in training. 2 = Did not.
23 9 105-113 (Left Justify and zero fill)	II.1f. Occupational skills training code	If the participant received any non-classroom training for a specific occupation, record the 9-digit DOT code or the 5-digit OES code that best describes the occupation. If the participant received classroom occupational skills training, either of these (DOT or OES) or the 6-digit CIP code that best describes the training should be recorded. If the participant received no specific training, record 000000000.  Note: this field should be left justified and zero-filled.
24 1 114	II.1f. Occupational type	Record the appropriate code for the type of system used:  1 = 9-digit DOT code.  2 = 5-digit OES code.  3 = 6-digit CIP code.  9 = No code.

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25 1 115	II.1g. Type of training	Record the appropriate code for the type of training received:  1 = Remedial training.  2 = Occupational (classroom) training.  3 = On-the-job (OJT) training.  If the participant received more than one type of training, record the type of training that comprised the major part of the participant's training.
26 1 116	II.2. Trade Readjustment Allowance (TRA)	1 = Received basic TRA. 2 = Received additional TRA. 3 = Received both basic and additional TRA. 4 = Did not receive any TRA.
27 1 117	II.3. Waiver from training	<ul> <li>1 = Received a waiver from the training requirement in order to receive TRA (TAA program only).</li> <li>2 = Did not receive such a waiver.</li> </ul>
28 1 118	II.4. Job search allowance	<ul><li>1 = Received a job search allowance.</li><li>2 = Did not receive a job search allowance.</li></ul>
29 1 119	II.5. Relocation allowance	<ul><li>1 = Received a relocation allowance.</li><li>2 = Did not receive a relocation allowance.</li></ul>
30 1 120	II.6. Basic reemployment service (BRS)	1 = Received any basic reemployment services as a result of being certified eligible to apply for adjustment assistance under TAA or NAFTA-TAA.  2 = Did not receive such services.
31 1 121	II.7. Other Federal program coenrollment	Record if the individual was coenrolled in the following programs:  1 = JTPA Title III adult dislocated worker program.  2 = Pell educational grant.  3 = Both 1 and 2 above.  4 = Other Federal job training (except those above).  9 = Not coenrolled in any other Federal program.

Field Number Size Position	TAA/NAFTA-TAA Item and Description	Guidelines
	Section III: Program	n Terminations and Other Outcomes
32 8 122-129	III.1. Date of termination	Record the date (MMDDYYYY) on which the participant is deemed to have terminated from the TAA or NAFTA-TAA program. A participant shall be deemed to have terminated if that participant has completed all of his/her reemployment program, or has withdrawn from such program prior to completion, and has received no other program benefits during the 90 days following completion/withdrawal. If the participant is known to be employed or the participant's outcome is otherwise known before the 90 days have elapsed, then the participant should immediately be deemed a terminee and the outcome data recorded.
33 1 130	III.2. Entered unsubsidized employment	Record 1 for Yes, 2 for No, or 9 for Unknown, indicating whether or not the terminee entered full- or part-time unsubsidized employment (i.e., not financed by funds provided under the Trade Act), including entry into the Armed Forces, employment in a registered apprenticeship program, and self-employment.
	III.3 Employment information	If item III.2 is Yes, record the following information:
34 2 131-132	III.3a. Hours worked per week	Record the usual number of hours (00) of work scheduled per week in whole hour increments (no fractions of hours), including overtime. If the hours scheduled per week are unknown, record "99". If the hours scheduled per week are larger than 98, record a "98".
35 6 133-138	III.3b. Hourly wage at termination	Record the hourly wage at termination (000.00); enter 0 for unknown. Hourly wage includes any bonuses, tips, gratuities, commissions, and overtime pay earned.

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36 1 139	III.3c. Receives fringe benefits	Record whether or not the job provides fringe benefits consisting of, at a minimum, health insurance benefits and coverage under Social Security or an equivalent pension plan. Note: In cases where a period of probation is required by the employer for newly-hired individuals, if such employment normally provides fringe benefits after the period of probation, record a 1 for Yes in this item.  1 = Yes.  2 = No.  9 = Unknown.  If item III.2 is No, record a blank.
37 9 140-148 Numeric (left justify and zero fill)	III.3d. Occupational code	Record the occupational code (00000000), either 9-digit DOT or 5-digit OES, most appropriate for the job. For individuals holding multiple jobs, record the code for the job with the largest number of hours worked.  Note: this field should be left justified and zero filled.  If item III.2 is No, record a blank value.
38 1 149	III.3d. Occupational skills training type	Record the appropriate code for the occupational coding system used from the following list:  1 = 9-digit DOT code.  2 = 5-digit OES code.  3 = Unknown.  If item III.2 is No, record a blank.
39 2 150-151	III.3e. State where job is located	Record the two-digit FIPS State code (00) for the State where the job is located. If the job is located outside the United States, record "99".  If item III.2 is No, record a blank.
40 1 152	III.3f. Job covered by Unemployment Insurance	<ul> <li>1 = Yes, job is covered by Unemployment Insurance.</li> <li>2 = Not covered.</li> <li>If item III.2 is No, record a blank.</li> </ul>

Field Number Size Position	TAA/NAFTA-TAA Item and Description	Guidelines
41 1 153	III.3g. Recalled by layoff employer	<ul> <li>1 = Recalled by employer from which the most recent qualifying separation occurred.</li> <li>2 = Not recalled.</li> <li>9 = Unknown.</li> </ul>
		If item III.2 is No, record a blank.